DLN: 93493319215319 OMB No 1545-0047 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service For the 2019 calendar year, or tax year beginning 01-01-2018 , and ending 12-31-2018 Name of organization TENTH AMENDMENT PROJECT INC D Employer identification number B Check if applicable ☐ Address change 82-0822705 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite 1825 EYE STREET NO 900 ☐ Amended return □ Application pending (202) 350-9481 City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 20006 G Gross receipts \$ 6,375,000 Name and address of principal officer H(a) Is this a group return for JULIE DOZIER ☐Yes **☑**No subordinates? 1825 EYE STREET NO 900 H(b) Are all subordinates WASHINGTON, DC 20006 ☐ Yes ☐No ıncluded? Tax-exempt status ☐ 501(c)(3) **☑** 501(c)(4) **◄** (Insert no) 4947(a)(1) or 527 If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► 10THAMENDMENTPROJECT COM L Year of formation 2017 M State of legal domicile VA K Form of organization ✓ Corporation ☐ Trust ☐ Association ☐ Other ▶ Summary 1 Briefly describe the organization's mission or most significant activities THE TENTH AMENDMENT PROJECT IS DEDICATED TO THE NOTION THAT THE TENTH AMENDMENT TO THE UNITED STATES CONSTITUTION WAS ENACTED TO EXPRESSLY LIMIT THE POWERS DELINEATED TO THE FEDERAL GOVERNMENT AND TO RESERVE THE REST TO STATE GOVERNMENTS, WHO UNDERSTAND THE NEEDS OF THEIR CONSTITUENCIES BEST THE TENTH AMENDMENT PROJECT WORKS TO HALT THE EVER-EXPANDING SIZE AND SCOPE OF THE ADMINISTRATIVE STATE, TO HIGHLIGHT AND SUPPORT STATE ENDEAVORS TO SERVE AS LABORATORIES OF EXPERIMENTATION FOR POLICIES THAT WORK, AND TO PRESERVING THE CONSTITUTIONAL STRUCTURE OF Activities & Governance GOVERNMENT OUR FOUNDERS INTENDED 2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 3 Number of voting members of the governing body (Part VI, line 1a) . 4 1 4 Number of independent voting members of the governing body (Part VI, line 1b) . 0 5 5 Total number of individuals employed in calendar year 2018 (Part V, line 2a) Total number of volunteers (estimate if necessary) 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a **b** Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . 3,855,000 6.375.000 Program service revenue (Part VIII, line 2g) . 0 0 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 0 0 O 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 3,855,000 6,375,000 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . . 35,000 5,125,000 14 Benefits paid to or for members (Part IX, column (A), line 4) . 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Expenses 0 16a Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶0 4,709,900 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 289,649 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 324,649 9,834,900 19 Revenue less expenses Subtract line 18 from line 12 . 3.530.351 -3,459,900 Assets or d Balances End of Year Beginning of Current Year 3,530,351 70,451 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . Net assets or fund balances Subtract line 21 from line 20 3,530,351 70 451 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2019-11-15 Signature of officer Date Sign Here JULIE DOZIER TREASURER Type or print name and title Print/Type preparer's name Preparer's signature Date Check \square if P01257722 Paid self-employed Firm's EIN ▶ 74-2920819 Firm's name ATCHLEY & ASSOCIATES LLP Preparer Use Only Firm's address ► 1005 LA POSADA DRIVE Phone no (512) 346-2086 AUSTIN, TX 78752 ☑ Yes ☐ No May the IRS discuss this return with the preparer shown above? (see instructions) For Paperwork Reduction Act Notice, see the separate instructions. Form **990** (2018) Cat No 11282Y

Form	990 (2018)					Page 2
Pa	statement of	Program Servic	e Accomplis	hments		
	Check if Schedul	e O contains a respo	nse or note to	any line in this Part III .		🗹
1	Briefly describe the orga			•		
ENAC WHO AND EXPE	CTED TO EXPRESSLY LIMI UNDERSTAND THE NEED SCOPE OF THE ADMINIST	T THE POWERS DEL: OS OF THEIR CONSTI FRATIVE STATE, TO	INEATED TO TH TUENCIES BES HIGHLIGHT AN	IE FEDERAL GOVERNMEN T THE TENTH AMENDME D SUPPORT STATE ENDE	NDMENT TO THE UNITED STATES OF AND TO RESERVE THE REST TO SENT PROJECT WORKS TO HALT THE AVORS TO SERVE AS LABORATORI NAL STRUCTURE OF GOVERNMENT	STATE GOVERNMENTS, EVER-EXPANDING SIZE ES OF
2	the prior Form 990 or 9 If "Yes," describe these	90-EZ? new services on Sch	edule O	vices during the year wh		□Yes ☑ No
3	services?			changes in how it condu	cts, any program	☐ Yes ☑ No
4		501(c)(4) organizatio	ns are required	to report the amount of	argest program services, as measui grants and allocations to others, th	
4a	(Code See Additional Data) (Expenses \$	7,112,474	including grants of \$	5,125,000) (Revenue \$)
4b	(Code) (Expenses \$		including grants of \$) (Revenue \$)
4 c	(Code) (Expenses \$		including grants of \$) (Revenue \$)
4d	Other program services (Expenses \$	•	ile O) uding grants of	\$) (Revenue \$)
4e	Total program service	e expenses >	7,112,4	74		

Form 990 (2018) Page 3 **Checklist of Required Schedules** Yes Nο Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Νo 1 2 Yes Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 💆 . . . Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates Yes 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? 5 Nο Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? No 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, Nο 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? Nο If "Yes," complete Schedule D, Part III 8 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation No 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, 10 Nο permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable Did the organization report an amount for land, buildings, and equipment in Part X, line 10? No 11a Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total Nο assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11b Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more of its Νo 11c Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported No 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e Nο Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses 11f Νo the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D. Part X 12a Did the organization obtain separate, independent audited financial statements for the tax year?

b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX,

b Was the organization included in consolidated, independent audited financial statements for the tax year?

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

column (A), line 2? If "Yes," complete Schedule I, Parts I and III

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

12a Nο 12b Nο

Νo

Nο

Nο

Νo

Nο

Nο

Nο

Νo

Νo

Nο

Form 990 (2018)

13

14a

14b

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16

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18

19

20a

20b

21

Yes

Part V

Form	990 (2018)			Page 4
Pai	Checklist of Required Schedules (continued)			
			Yes	No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note.			

All Form 990 filers are required to complete Schedule O Yes 38

1a

1b

Yes

Yes Form **990** (2018)

9

0

No

Statements Regarding Other IRS Filings and Tax Compliance

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable .

b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

Check if Schedule O contains a response or note to any line in this Part V $\,$.

 ${f c}$ Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

1 01111	990 (2016)					Page
Pa	Governance, Management, and Disclosure For each "Yes" response to lines 2 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Sched Check if Schedule O contains a response or note to any line in this Part VI	lule O	See instructions	•	onse to	lines ✓
Se	ction A. Governing Body and Management					
	•				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	1			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O					
b	Enter the number of voting members included in line 1a, above, who are independent					
		1b	1			
2	Did any officer, director, trustee, or key employee have a family relationship or a busine officer, director, trustee, or key employee?			2		No
3	B Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?					No
4	Did the organization make any significant changes to its governing documents since the	Form 990 was filed? .	4		No	
5	Did the organization become aware during the year of a significant diversion of the orga	nızatıo	n's assets? .	5		No
6	Did the organization have members or stockholders?			6		No
7a	Did the organization have members, stockholders, or other persons who had the power members of the governing body?			7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by persons other than the governing body?			7b		No
8	Did the organization contemporaneously document the meetings held or written actions the following	under	aken during the year by			
а	The governing body?			8a	Yes	
b	Each committee with authority to act on behalf of the governing body?			8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule</i> 0			9		No
	etion B. Bolicias (This Section B requests information about policies not requ		the Internal Davins	- Cad		

Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes Nο 10a Did the organization have local chapters, branches, or affiliates? 10a No b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, 10b and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the 11a Yes **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 . **12a** Did the organization have a written conflict of interest policy? If "No," go to line 13 . . . 12a Yes b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in 12c Yes 13 13 Νo 14 Νo 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a Νo 15b Nο If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16a Nο b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt 16b Section C. Disclosure List the States with which a copy of this Form 990 is required to be filed 17

Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website 🗹 Upon request 🔲 Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records ▶JULIE DOZIER 1825 EYE STREET NO 900 WASHINGTON, DC 20006 (202) 350-9481

Name and Title

(F)

Estimated

amount of other

compensation

Part VII

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII. Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount

Position (do not check more

than one box, unless person

is both an officer and a

Reportable

compensation

from the

Reportable

compensation

from related

- of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee" • List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee)
- who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations • List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000
- of reportable compensation from the organization and any related organizations • List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the
- organization, more than \$10,000 of reportable compensation from the organization and any related organizations List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

🗹 Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee (A) (B) (C) (D) (E)

Average

hours per

week (list

	any hours	dırect		or/trustee)				organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	e⇔tsny jeuodnytsuj	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
(1) BYRON KOAY DIRECTOR	1 00	Х		х				0	0	0
(2) JAMES MCKAY CHAIRMAN (AS OF JULY 2018)	1 00	х		х				0	0	0
(3) SHAWN REINSCHMIEDT DIRECTOR	1 00	Х		х				0	0	0
(4) DANIEL CONSTON CHAIRMAN (THRU JULY 2018)	1 00	Х		х				0	0	0
(5) JULIE DOZIER TREASURER (AS OF JULY 2018)	1 00			×				0	0	0
(6) MARIA WOJCIECHOWSKI TREASURER (THRU JULY 2018)	1 00			х				0	0	0
										Form 990 (2018)

Page 8 Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) Part VII (B) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless person compensation compensation amount of other week (list is both an officer and a from related from the compensation organization (Worganizations (Wany hours director/trustee) from the for related 2/1099-MISC) 2/1099-MISC) organization and Highest compensati Individual trustee or director organizations related Institutional <u>0</u> below dotted organizations employee line) Trustee Ē • 1b Sub-Total . c Total from continuation sheets to Part VII, Section A . • d Total (add lines 1b and 1c) ٠ 2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization > 0 Yes No 3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual . 3 Nο For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual . 4 Nο 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person 5 No Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year (A) (B) (C) Name and business address Description of services Compensation CROSSROADS MEDIA LLC MEDIA CONSULTING 1,331,640 66 CANAL CENTER PLZ 555 ALEXANDRIA, VA 22314

AX MEDIA LLC 1251 NW BRIARCLIFF PARKWAY 85 KANSAS CITY, MO 64116 NOVEMBER INC PO BOX 371553

LAS VEGAS, NV 89137 NORWAY HILL ASSOCIATES INC

compensation from the organization ▶ 4

30 NORWAY HILL RD HANCOCK, NH 03449

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

ADVERTISING SERVICES

STRATEGY CONSULTING

DIGITAL ADVERTISING SERVICES

499,965

150,000

105,695

Form 990 (2018)

		(2018)							Page 9
Part	VIII					alima in the Day 1977			
		Check If Schedul	e O contains	a respo	onse or note to any	/ line in this Part VIII (A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	1a	Federated campaig	ns	1a			revenue		512 - 514
nts ints		Membership dues		1b					
Sra nou		: Fundraising events		1c					
رة كاركي		l Related organizatio		1d					
<u> </u>	e	Government grants (co	ontributions)	1e	1				
Contributions, Giffs, Grants and Other Similar Amounts	f	All other contributions	, gıfts, grants,						
utio		and similar amounts n above	ot included	1 f	6,375,000				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contribution In lines 1a - 1f \$	ons included						
	١,	Total. Add lines 1a	-1f		•				
	_				Busines	6,375,000 s Code	<u> </u>		
J. L	2a								
₽. .×	b b			_					
Service Revenue	c								
Şe Ç	d			_					
an	e			_					
Program		All other program se				'	'	1	•
<u>~</u>		Fotal. Add lines 2a-2			<u> </u>	_			
	3 I	nvestment income (ii imilar amounts) .	ncluding divid		nterest, and other i	<u> </u>			
		ncome from investme	ent of tax-exe	empt bo	ond proceeds	•			
	5 F	Royalties				<u> </u>			
	6a	Gross rents	(ı) Rea	11	(II) Personal	\dashv			
	b	Less rental expenses							
	С	Rental income or (loss)				1			
	d	Net rental income o	r (loss)			-			
			(ı) Securi		(II) Other				
	7a	Gross amount from sales of							
		assets other than inventory							
	ь	Less cost or				-			
		other basis and sales expenses							
		Gain or (loss)							
		Net gain or (loss) . Gross income from from			•	_			
<u>ə</u>		(not including \$		of					
Other Revenue		contributions reported See Part IV, line 18	ed on line 1c)	a	l				
Re	b	Less direct expense	s	b					
er		Net income or (loss)			ents	_			
	9a	Gross income from g See Part IV, line 19	amıng actıvıt	ies					
				а					
		Less direct expense		b					
		Net income or (loss) Gross sales of invent		activit	ies <u>b</u>				
		returns and allowand	ces						
	L		اماما	a		_			
		Less cost of goods s Net income or (loss)		b funyent		_			
		Miscellaneous		ilivelli	Business Code				
	11:	a							
	b								
	С								
		All other server							
		All other revenue . Total. Add lines 11a			<u> </u>	1			
		Total revenue. See							
		. otal revellue. See	and actions	<u> </u>	• • • •	6,375,00	00	0	0 0 0

Section 501	(c)(3) and 501(c)(4)	organizations must o	complete all columns	All other organizations i	nust complete column (A)

For	m 990 (2018)				Page 10
	art IX Statement of Functional Expenses tion 501(c)(3) and 501(c)(4) organizations must complete all co	olumns All other orga	ınızatıons must comp	elete column (A)	_
	Check if Schedule O contains a response or note to any	line in this Part IX	<u> </u>	<u> </u>	<u> </u>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	5,125,000	5,125,000		
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
	a Management				
ı	b Legal	45,300		45,300	
	c Accounting	10,272		10,272	
	e Professional fundraising services See Part IV, line 17				
	f Investment management fees				
	g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0)	316,629	149,129	167,500	
12	Advertising and promotion				
13	Office expenses	12,500		12,500	
14	Information technology				
	Royalties				
	Occupancy				
	Travel				
	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
	Interest				
	Payments to affiliates				
	Depreciation, depletion, and amortization				
	Insurance				
	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
	a POLITICAL CONTRIBUTION	1,995,000		1,995,000	
	b ISSUE ADVOCACY ADS	1,733,945	1,733,945		
	c POLITICAL ADS	426,965		426,965	
	d POLLING/SURVEY	146,650	104,400	42,250	
	e All other expenses	22,639		22,639	
25	Total functional expenses. Add lines 1 through 24e	9,834,900	7,112,474	2,722,426	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Pa	art X	_	ha ha ann lura on tha Bart IV			
		Check if Schedule O contains a response or not	te to any line in this Part IX .	(A) Beginning of year	<u></u>	(B) End of year
	1	Cash-non-interest-bearing		3,530,351	1	70,451
	2	Savings and temporary cash investments .			2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and for trustees, key employees, and highest compense Part II of Schedule L	ated employees Complete		5	
ls.	6	Loans and other receivables from other disquali section 4958(f)(1)), persons described in sectio contributing employers and sponsoring organizations voluntary employees' beneficiary organizations Part II of Schedule L	on 4958(c)(3)(B), and ations of section 501(c)(9) (see instructions) Complete		6	
set	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use		8		
_	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a			
	b	Less accumulated depreciation	10b		10c	
	11	Investments—publicly traded securities .			11	
	12	Investments—other securities See Part IV, line	11		12	
	13	Investments—program-related See Part IV, line	e 11		13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11			15	
	16	Total assets.Add lines 1 through 15 (must equ	3,530,351	16	70,451	
	17	Accounts payable and accrued expenses			17	
	18	Grants payable			18	
	19	Deferred revenue			19	

20 Tax-exempt bond liabilities . . . 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

Liabilities persons Complete Part II of Schedule L . 22 23 23 Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties 24 24

Other liabilities (including federal income tax, payables to related third parties, 25

and other liabilities not included on lines 17 - 24) Complete Part X of Schedule D 0 0 26 Total liabilities. Add lines 17 through 25 . 26

Organizations that follow SFAS 117 (ASC 958), check here ightharpoonup and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets 27 27

Assets or Fund Balances 28 28 Temporarily restricted net assets 29 Permanently restricted net assets 29

Organizations that do not follow SFAS 117 (ASC 958),

check here ▶ ☑ and complete lines 30 through 34.

30 Capital stock or trust principal, or current funds . . . 0 30

31 Paid-in or capital surplus, or land, building or equipment fund . 31 0 3,530,351 32 70,451 32 Retained earnings, endowment, accumulated income, or other funds

70,451

70,451

Form **990** (2018)

3,530,351

3,530,351

33

34

Net

33

34

Total net assets or fund balances

Total liabilities and net assets/fund balances

Form	990 (2018)				Page 12
Pa	Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI			<u> </u>	
	T - 1			_	375 000
1	Total revenue (must equal Part VIII, column (A), line 12)	1			,375,000
2	Total expenses (must equal Part IX, column (A), line 25)	2			,834,900
3	Revenue less expenses Subtract line 2 from line 1	3			,459,900
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			,530,351
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10			70,451
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990 🗹 Cash 🔲 Accrual 🔲 Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both	on a			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both	basıs,			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O			
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sil	ngle	3a		No

3b

Form **990** (2018)

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Additional Data

Software ID:

Software Version: 82-0822705

Name: TENTH AMENDMENT PROJECT INC

Form 990 (2018)

Form 990, Part III, Line 4a:

THE TENTH AMENDMENT PROJECT ENGAGES IN PUBLIC POLICY ADVOCACY ON ISSUES RELATED TO STATE GOVERNMENTS AND THEIR GOVERNANCE, INCLUDING SUCH ISSUES AS STATE BUDGETS, STATE TAXES, PUBLIC SAFETY AND CRIME, EDUCATION, THE ENVIRONMENT, ETHICS FOR PUBLIC OFFICIALS, AND FOR SUPPORTING POLICIES AT THE STATE AND FEDERAL LEVELS THAT FURTHER THE GOALS OF FEDERALISM

DLN: 93493319215319 **Political Campaign and Lobbying Activities** OMB No 1545-0047 SCHEDULE C (Form 990 or 990-For Organizations Exempt From Income Tax Under section 501(c) and section 527 EZ) ▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. Open to Public Department of the Treasury ▶Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Internal Revenue Service If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then • Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B. Section 527 organizations Complete Part I-A only If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then • Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B • Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then • Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** TENTH AMENDMENT PROJECT INC 82-0822705 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") Political campaign activity expenditures (see instructions) 3 Volunteer hours for political campaign activities (see instructions) Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes Was a correction made? ☐ Yes ☐ No If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities 1 656,718 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt 1,995,000 function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b 2,651,718 Did the filing organization file Form 1120-POL for this year? **☑** No ☐ Yes 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received funds If none, enter and promptly and -0directly delivered to a separate political organization If none, enter -0-(1) FIGHTING FOR NEVADA 631 N STEPHANIE 106 82-2296262 1,900,000 HENDERSON, NV 89014 (2) TENTH AMENDMENT ACTION PROJECT 1001 PENNSYLVANIA AVE NW STE 82-4478156 95,000 WASHINGTON, DC 20004 5

Schedule C (Form 990 or 990-EZ) 2018

Cat No 50084S

For Paperwork Reduction Act Notice, see the instructions for Form 990 or 990-EZ.

e	Total exempt purpose expenditures (add lines 1c and					
f	Lobbying nontaxable amount Enter the amount from columns					
	If the amount on line 1e, column (a) or (b) is:	line 1e, column (a) or (b) is: The lobbying nontaxable amount is:				
	Not over \$500,000	20% of the amount on line				
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	0			
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	000			
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the e	xcess over \$1,500,0	00		
	Over \$17,000,000	\$1,000,000				
g h i j	Grassroots nontaxable amount (enter 25% of line 1f Subtract line 1g from line 1a If zero or less, enter -0 Subtract line 1f from line 1c If zero or less, enter -0 If there is an amount other than zero on either line 1 section 4911 tax for this year?)- - .h or line 1i, did the org] Yes □ No
	(Some organizations that made a columns below. See t		ction do not h	ave to comple		ive
	Lobbying Expe	enditures During 4	-Year Averagi	ng Period		
	Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2 a	Lobbying nontaxable amount					
ь	Lobbying ceiling amount (150% of line 2a, column(e))					
_с	Total lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2018

Grassroots nontaxable amount

Grassroots lobbying expenditures

Grassroots ceiling amount (150% of line 2d, column (e))

Return Reference

PART I-A, LINE 1

For e	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a)		(b)	二
ror e. activi		Yes	No	Amou	unt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?	11			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c	Media advertisements?				
d	Mailings to members, legislators, or the public?				_
е	Publications, or published or broadcast statements?				_
f	Grants to other organizations for lobbying purposes?				_
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				_
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				_
i	Other activities?				_
j	Total Add lines 1c through 1i	<u> </u>			_
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	11			
b	If "Yes," enter the amount of any tax incurred under section 4912	<u> </u>			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912	1			_
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	1			_
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).)(5), or	· section		
	We want to be at the ell (000) an array of the array and analysis by mambare?			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		2		
2 3	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		
_	Did the organization agree to carry over lobbying and political expenditures from the prior year?	·/=\			16
Pen	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes.")(0
1	Dues, assessments and similar amounts from members	1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).				
a	Current year	2a			
b	Carryover from last year	2b			
С	Total	2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4			
5	Taxable amount of lobbying and political expenditures (see instructions)	5			
Pa	art IV Supplemental Information				_
	vide the descriptions required for Part l-A, line 1, Part l-B, line 4, Part l-C, line 5, Part II-A (affiliated group list), tructions), and Part II-B, line 1 Also, complete this part for any additional information	Part II-/	A, lines 1 a	ınd 2 (se	÷е

POLITICAL STRATEGY CONSULTING AND POLLING

Explanation

DLN: 93493319215319 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations**, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public ▶ Attach to Form 990. Department of the Inspection ▶ Go to www.irs.gov/Form990 for the latest information. Treasurv Internal Revenue Service Name of the organization Employer identification number TENTH AMENDMENT PROJECT INC 82-0822705 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 1 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) organization cash (book, FMV, appraisal, noncash assistance or assistance grant or government assistance other) (1) See Additional Data (2) (4)(5)(6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 2 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2018

Schedule I (Form 990) 2018						Page 2
		Domestic Individuonal space is needed	als. Complete if the org	janization answered "Yes	on Form 990, Part IV, line 22	
(a) Type of grant or	•	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
Part IV Suppleme	ental Informati	on. Provide the inf	ormation required in	Part I, line 2; Part III	, column (b); and any other a	ddıtıonal ınformatıon.
Return Reference	Explanati	on				
PART I, LINE 2 A GRANT REPORT IS REQUESTED FROM THE RECIPIENT WITHIN SIX MONTHS OF RECEIVING THE GRANT THE RECIPIENT MUST ALSO ATTEST THAT THEY HAVE THE FUNDS FOR THE PURPOSES OUTLINED IN THEIR APPLICATION A GRANT APPLICATION IS REVIEWED AND APPROVED BY THE BOARD OF DIRECTORS						

Additional Data

5841 E CHARLESTON BLVD

ILLINOIS MANUFACTURERS

LAS VEGAS, NV 89142

SPRINGFIELD, IL 62701

230253

ASSOCIATION

220 E ADAMS ST

Software ID: Software Version: **EIN:** 82-0822705 Name: TENTH AMENDMENT PROJECT INC Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash

36-1256610

4,800,000

organization or government		ıf applicable	grant	cash assistance	(book, FMV, appraisal, other)
CITIZEN OUTREACH INC	20-5561346	501C4	30,000		

501C6

(e) Amount of non- (f) Method of valuation

(q) Description of non-cash assistance

(h) Purpose of grant or assistance

TO HELP

ORGANIZATION WITH

ORGANIZATION WITH

THEIR MISSION

THEIR MISSION OBJECTIVES

OBJECTIVES

TO HELP

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant ıf applıcable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 20 0505040 E0404 E0 000 TO LIELD

LEADERSHIP FOUNDATION 1201 F STREET NW NO 675 WASHINGTON, DC 20004	20-0505849	501C4	50,000		ORGANIZATION WITH THEIR MISSION OBJECTIVES
CONSERVATIONE POLICY	81-2935670	501C3	75,000		TO HELP

THEIR MISSION

OBJECTIVES

FOUNDATION ORGANIZATION WITH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

3595 RR 620 SOUTH NO 200

AUSTIN, TX 78738

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance

WITH

THEIR MISSION

OBJECTIVES

CONSERVATIVE ACTION NETWORK 3595 RR 620 SOUTH NO 200	81-2956944	501C4	85,000		TO HELP ORGANIZATION V THEIR MISSION
AUSTIN, TX 78738					OBJECTIVES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

SUITE 124

STAMFORD, CT 06905

82-2575169 501C4 25.000 TO HELP SOLDIER STRONG ACCESS 1127 HIGH RIDGE ROAD ORGANIZATION WITH

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501C3 10.000 TO HELP TEXAS PUBLIC POLICY 74-2524057 FOUNDATION ORGANIZATION WITH THEIR MISSION OBJECTIVES

ORGANIZATION WITH

THEIR MISSION OBJECTIVES

901 CONGRESS AVENUE AUSTIN.TX 78701 47-4169138 501C4 25.000 TO HELP

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

MORNING IN NEVADA PO BOX 97212 LAS VEGAS, NV 89193

(a) Name and address of (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant **(b)** EIN (c) IRC section organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

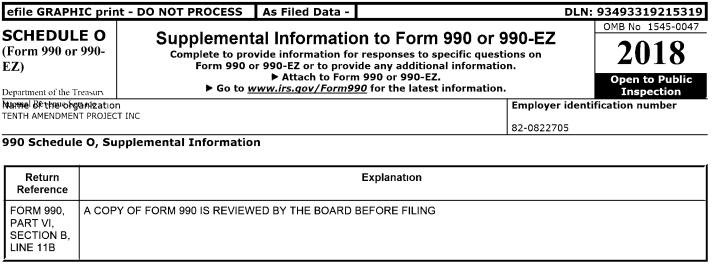
OBJECTIVES

501C4 25.000 TO HELP BETTER JOBS STRONGER 82-3073492 FAMILIES POLICY SOLUTIONS ORGANIZATION WITH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

MIDLAND, MI 48640

240 W MAIN STREET STE 1000 THEIR MISSION



Return Explanation
Reference

990 Schedule O, Supplemental Information

FORM 990,	IN CONNECTION WITH ANY ACTUAL OR POSSIBLE CONFLICT OF INTEREST, AN INTERESTED PERSON MUST
PART VI,	DISCLOSE THE EXISTENCE OF THE FINANCIAL INTEREST AND BE GIVEN THE OPPORTUNITY TO DISCLOSE
SECTION B,	ALL MATERIAL FACTS TO THE DIRECTORS AND MEMBERS OF COMMITTEES WITH GOVERNING BOARD DELEGAT
LINE 12C	ED POWERS CONSIDERING THE PROPOSED TRANSACTION OR ARRANGEMENT

Return Explanation
Reference

990 Schedule O, Supplemental Information

FORM 990, THE ORGANIZATION'S GOVERNING DOCUMENTS ARE NOT AVAILABLE TO THE PUBLIC PART VI, SECTION C, LINE 19